PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 \(\lambda \text{op} \cap \lambda \text{op} \lambda \text{op} \cap \lambda \text{op} \cap \lambda \text{op} \lambda \tex														
		SMALL ENTITY OTHER THA												
TOTAL CLAIMS			20		van o		F	RATE	FEE		RATE	F	EE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	71	0.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		• \$		>	X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			ل minus 3 =				,	(40=		OR X80=		- 2	30	
MULTIPLE DEPENDENT CLAIM PRESENT						+135=			OR	+270=				
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	<u>L</u>	DTAL		OR	TOTAL	3	90	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
ENT A		CLAIMS REMAINING AFTER AMENDMENT	**************************************	HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- ONAL EE	
AMENDWENT A	Total	· 10	Minus	·· (D,	=	>	(\$ 9=		OR	X\$18=			
	Independent	* U	Minus	***	C AIM	=		(40=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								135=		OR	+270=			
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE			
		(Column 1)												
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- ONAL EEE	
	Total	. 20	Minus	** 6	(N)	=	>	(\$ 9=	<u> </u>	OR	X\$18=			
AME	Independent	· U	Minus	***	<u> </u>	= \		(40=		OR	X80=		1	
L	FIRST PRESENTATION OF MOLTIFLE DEFENDENT CLAIM							135=		OR	+270=			
Best Available Copy Total											TOTAL			
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TI	DDI- ONAL FEE	
	Total	. 3	Minus	1	0	=] [>	(\$ 9=		OR	X\$18=		90	
AME	Independent	· φ	Minus	***	4	= 2	↓ ,	(40=		OR	X80=	1	12	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							125			+270=	Ė		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												\overline{n}		
***	If the "Highest Nu	mber Previously P mber Previously P nber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	,,,,,,	IT. FEE	propriate bo	_	ADDIT. FEE	یے	<u>'/\/</u>	

Application or Docket Number